

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Louisiana Reform PAC

ADDRESS (number and street)

PO Box 1542

☐Check if different
than previously
reported. (ACC)

Shreveport

LA

71165

1542

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00409631

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☒July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2011

through

06

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

John Schmidt

Signature of Treasurer

Electronically Filed by John Schmidt

Date

07

31

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Louisiana Reform PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	<div>2011</div>	<div>6656.76</div>
(b) Cash on Hand at Beginning of Reporting Period	<div>6656.76</div>	
(c) Total Receipts (from Line 19)	<div>91628.84</div>	<div>91628.84</div>
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<div>98285.60</div>	<div>98285.60</div>
7. Total Disbursements (from Line 31)	<div>78317.64</div>	<div>78317.64</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>19967.96</div>	<div>19967.96</div>
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Louisiana Reform PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	51450.00	51450.00
(ii) Unitemized	150.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	51600.00	51600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	32500.00	32500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	84100.00	84100.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2528.84	2528.84
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	91628.84	91628.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	91628.84	91628.84

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	56651.82	56651.82	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	56651.82	56651.82	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21665.82	21665.82	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	78317.64	78317.64	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	78317.64	78317.64	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	84100.00	84100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	84100.00	84100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	56651.82	56651.82
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	56651.82	56651.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Leopold Sher

Mailing Address 909 Poydras Street
Floor 28

City State Zip Code
New Orleans LA 70112-4000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sher Garner

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI-171-941-c

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Lawrence Sisung, Jr

Mailing Address 201 Saint Charles Avenue
Suite 4240

City State Zip Code
New Orleans LA 70170-1048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sisung Capital, LLC

Occupation
Managing Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 1

Transaction ID: SA11AI-448-945-c

Amount of Each Receipt this Period

300.00

WMG

C.

Full Name (Last, First, Middle Initial)

Barry Perrin

Mailing Address 525 Kathleen Drive

City State Zip Code
Ponchatoula LA 70454-3913

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation
Entertainment Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 1

Transaction ID: SA11AI-494-919-c

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Michael Goff

Mailing Address 1334 Woodmere Drive

City

Mandeville

State

LA

Zip Code

70471-7456

FEC ID number of contributing
federal political committee.

C

Name of Employer
Science & Engineering

Occupation

In House Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI-508-942-c

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Erica Lawson

Mailing Address 315 W Parker Boulevard
Apt. 4

City

Baton Rouge

State

LA

Zip Code

70808-0600

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Self-employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 1

Transaction ID: SA11AI-509-943-c

Amount of Each Receipt this Period

300.00

WMG

C.

Full Name (Last, First, Middle Initial)

John Lawson

Mailing Address 108 Bird Avenue

City

Natchitoches

State

LA

Zip Code

71457-5214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mutual Credit Plan Corp

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 1

Transaction ID: SA11AI-510-944-c

Amount of Each Receipt this Period

300.00

WMG

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Cheryl Felder

Mailing Address 235 Broadway Street

City

New Orleans

State

LA

Zip Code

70118-3509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Channel Shipyards

Occupation

Executive VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	4	/	2	0	1	1

Transaction ID: SA11AI-511-946-c

Amount of Each Receipt this Period

300.00

WMG

B.

Full Name (Last, First, Middle Initial)

Peter John

Mailing Address PO Box 1566

City

Crowley

State

LA

Zip Code

70527-1566

FEC ID number of contributing
federal political committee.

C

Name of Employer
John PAC

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: SA11AI-512-947-c

Amount of Each Receipt this Period

300.00

WMG

C.

Full Name (Last, First, Middle Initial)

Peter John

Mailing Address PO Box 1566

City

Crowley

State

LA

Zip Code

70527-1566

FEC ID number of contributing
federal political committee.

C

Name of Employer
John PAC

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	1	1

Transaction ID: SA11AI-512-987-c

Amount of Each Receipt this Period

2500.00

Derby Event

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Roger Smith

Mailing Address 1324 Nashville Avenue

City

New Orleans

State

LA

Zip Code

70115-4330

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11AI-513-948-c

Amount of Each Receipt this Period

300.00

WMG

B.

Full Name (Last, First, Middle Initial)

Roger Smith

Mailing Address 1324 Nashville Avenue

City

New Orleans

State

LA

Zip Code

70115-4330

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI-513-976-c

Amount of Each Receipt this Period

150.00

WMG

C.

Full Name (Last, First, Middle Initial)

Joseph Toomy

Mailing Address PO Box 663

City

Gretna

State

LA

Zip Code

70054-0663

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11AI-514-949-c

Amount of Each Receipt this Period

300.00

WMG

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Edward Diefenthal

Mailing Address 131 Airline Drive
Suite 202

City State Zip Code
Metairie LA 70001-6265

FEC ID number of contributing
federal political committee.

C

Name of Employer
Woodvine Group, LLC

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11AI-515-950-c

Amount of Each Receipt this Period

5000.00

Derby Event

B.

Full Name (Last, First, Middle Initial)

Roy Martin, III

Mailing Address PO Box 1110

City State Zip Code
Alexandria LA 71309-1110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Roy Marting Lumber Mgmt,
LLC

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI-522-969-c

Amount of Each Receipt this Period

2500.00

Derby Event

C.

Full Name (Last, First, Middle Initial)

Kathy Martin

Mailing Address PO Box 1110

City State Zip Code
Alexandria LA 71309-1110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Community Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI-523-970-c

Amount of Each Receipt this Period

2500.00

Derby Event

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Bishop Johnston

Mailing Address PO Box 4570

City

Monroe

State

LA

Zip Code

71211-4570

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cymetech, LLC

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Transaction ID: SA11AI-524-971-c

Amount of Each Receipt this Period

2500.00

Derby Event

B.

Full Name (Last, First, Middle Initial)

Jody Johnston

Mailing Address PO Box 4570

City

Monroe

State

LA

Zip Code

71211-4570

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cymetech, LLC

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Transaction ID: SA11AI-525-972-c

Amount of Each Receipt this Period

2500.00

Derby Event

C.

Full Name (Last, First, Middle Initial)

Donald Chailland

Mailing Address PO Box 8627

City

Metairie

State

LA

Zip Code

70011-8627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive Office Suites,
LLC

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Transaction ID: SA11AI-526-973-c

Amount of Each Receipt this Period

2500.00

Derby Event

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Darlene Clair

Mailing Address PO Box 8627

City

Metairie

State

LA

Zip Code

70011-8627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	1	1

Transaction ID: SA11AI-527-974-c

Amount of Each Receipt this Period

2500.00

Derby Event

B.

Full Name (Last, First, Middle Initial)

Alexa John

Mailing Address PO Box 1566

City

Crowley

State

LA

Zip Code

70527-1566

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	1	1

Transaction ID: SA11AI-532-988-c

Amount of Each Receipt this Period

2500.00

Derby Event

C.

Full Name (Last, First, Middle Initial)

Mark Miller

Mailing Address PO Box 52928

City

Lafayette

State

LA

Zip Code

70505-2928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Self-employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	1	1

Transaction ID: SA11AI-533-989-c

Amount of Each Receipt this Period

2500.00

Derby Event

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Angela Miller

Mailing Address PO Box 52928

City

Lafayette

State

LA

Zip Code

70505-2928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 1 1

Transaction ID: SA11AI-534-990-c

Amount of Each Receipt this Period

2500.00

Derby Event

B.

Full Name (Last, First, Middle Initial)

W. Elton Kennedy

Mailing Address PO Box 259

City

Mer Rouge

State

LA

Zip Code

71261-0259

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kennedy Rice

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: SA11AI-535-1031-c

Amount of Each Receipt this Period

1500.00

Derby Event

C.

Full Name (Last, First, Middle Initial)

W. Elton Kennedy

Mailing Address PO Box 259

City

Mer Rouge

State

LA

Zip Code

71261-0259

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kennedy Rice

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 1 1

Transaction ID: SA11AI-535-991-c

Amount of Each Receipt this Period

2500.00

Derby Event

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Anne Kennedy

Mailing Address PO Box 259

City

Mer Rouge

State

LA

Zip Code

71261-0259

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	1

Transaction ID: SA11AI-536-1030-c

Amount of Each Receipt this Period

1500.00

Derby Event

B.

Full Name (Last, First, Middle Initial)

Anne Kennedy

Mailing Address PO Box 259

City

Mer Rouge

State

LA

Zip Code

71261-0259

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	1	1

Transaction ID: SA11AI-536-992-c

Amount of Each Receipt this Period

2500.00

Derby Event

C.

Full Name (Last, First, Middle Initial)

Michele Cooper

Mailing Address 106 Fontainebleau Drive

City

Mandeville

State

LA

Zip Code

70471-6419

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11AI-542-1011-c

Amount of Each Receipt this Period

2500.00

Derby Event

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Barry Breaux

Mailing Address 4945 Folsie Drive

City

Metairie

State

LA

Zip Code

70006-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Quest Diagnostics

Occupation
Pathologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: SA11AI-548-1028-c

Amount of Each Receipt this Period

2500.00

Derby Event

B.

Full Name (Last, First, Middle Initial)

Diane Breaux

Mailing Address 4945 Folsie Drive

City

Metairie

State

LA

Zip Code

70006-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 6 / 2 0 1 1

Transaction ID: SA11AI-549-1029-c

Amount of Each Receipt this Period

2500.00

Derby Event

C.

Full Name (Last, First, Middle Initial)

Scott Sullivan

Mailing Address 106 Fontainebleau Drive

City

Mandeville

State

LA

Zip Code

70471-6419

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ctr. Restorative Breast
Sur.

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11AI-62-1010-c

Amount of Each Receipt this Period

2500.00

Derby Event

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

51450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 37

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

ARPAC

Mailing Address Premier Tower 19th Floor
451 Florida Blvd

City State Zip Code
Baton Rouge LA 70801

FEC ID number of contributing
federal political committee.

C C00226472

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11C-51-951-c

Amount of Each Receipt this Period

5000.00

WMG

B.

Full Name (Last, First, Middle Initial)

Entergy Corporation PAC (EnPAC)

Mailing Address 101 Constitution Avenue NW
Suite 200EAST

City State Zip Code
Washington DC 20001-2133

FEC ID number of contributing
federal political committee.

C C00363879

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: SA11C-77-952-c

Amount of Each Receipt this Period

5000.00

WMG

C.

Full Name (Last, First, Middle Initial)

GEPAC

Mailing Address 1299 Pennsylvania Avenue NW
Suite 900

City State Zip Code
Washington DC 20004-2414

FEC ID number of contributing
federal political committee.

C C00024869

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 1 1

Transaction ID: SA11C-518-955-c

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 37

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 55 Glenlake Parkway NE

City State Zip Code
Atlanta GA 30328-3474

FEC ID number of contributing
federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11C-197-956-c

Amount of Each Receipt this Period

5000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
DLA Piper PAC

Mailing Address 500 8th Street NW

City State Zip Code
Washington DC 20004-2131

FEC ID number of contributing
federal political committee. **C** C00151340

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 1 1

Transaction ID: SA11C-537-993-c

Amount of Each Receipt this Period

1500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Northeast Utilities Employees' PAC

Mailing Address 901 F Street NW
Suite 602

City State Zip Code
Washington DC 20004-1475

FEC ID number of contributing
federal political committee. **C** C00102160

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11C-541-1009-c

Amount of Each Receipt this Period

5000.00

Derby Event

SUBTOTAL of Receipts This Page (optional)

11500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 37

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
UBS Americas Fund For Better Government

Mailing Address 1501 K Street NW
Suite 1100

City State Zip Code
Washington DC 20005-1410

FEC ID number of contributing
federal political committee. **C** C00012245

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 1 1

Transaction ID: SA11C-550-1032-c

Amount of Each Receipt this Period

5000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
American Optometric Association PAC

Mailing Address 1505 Prince Street
Suite 300

City State Zip Code
Alexandria VA 22314-2874

FEC ID number of contributing
federal political committee. **C** C00024968

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 1 1

Transaction ID: SA11C-551-1033-c

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

32500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 37

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Republican Party of Louisiana

Mailing Address 530 Lakeland Drive
Suite 215

City	State	Zip Code
Baton Rouge	LA	70802-4441

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	1

Transaction ID: SA16-1014000

Amount of Each Receipt this Period

5000.00

Refund of excess contribu-
tion

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 37

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Hilton Washington & Towers

Mailing Address 1919 Connecticut Avenue NW

City

Washington

State

DC

Zip Code

20009-5701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.60

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA17-423-1013-m

Amount of Each Receipt this Period

358.60

WMG Hotel Refund

B.

Full Name (Last, First, Middle Initial)

Hampton Inn

Mailing Address 101 E Jefferson Street

City

Louisville

State

KY

Zip Code

40202-1301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2170.24

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA17-531-1015-m

Amount of Each Receipt this Period

1446.82

Refund of Derby Hotel

C.

Full Name (Last, First, Middle Initial)

Hampton Inn

Mailing Address 101 E Jefferson Street

City

Louisville

State

KY

Zip Code

40202-1301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2170.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 3 / 2 0 1 1

Transaction ID: SA17-531-1034-m

Amount of Each Receipt this Period

723.42

Derby Hotel refund

SUBTOTAL of Receipts This Page (optional)

2528.84

TOTAL This Period (last page this line number only)

2528.84

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

<p>A. Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement January software maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-164-928-e</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 403.00</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Courtney Guastella</p> <p>Mailing Address 7449 Garfield Street</p> <p>City New Orleans State LA Zip Code 70118-3636</p> <p>Purpose of Disbursement January retainer-no candidate benefitted</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-103-925-e</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>003 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Monica Schmidt</p> <p>Mailing Address 10010 Winding Ridge Drive</p> <p>City Shreveport State LA Zip Code 71106-7684</p> <p>Purpose of Disbursement January admin</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-165-926-e</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

1653.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial) CompleteCampaigns.com	Transaction ID: SB21B-164-924-e Date of Disbursement
Mailing Address 610 Gateway Center Way Suite K	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 7 / 2 0 1 1</div> </div>
City San Diego State CA Zip Code 92102-4548	Amount of Each Disbursement this Period
Purpose of Disbursement Credit card fee-no candidate benefitted Candidate Name	<div> <div>15.00</div> <div>003</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) KingCakes.com	Transaction ID: SB21B-418-927-e Date of Disbursement
Mailing Address 4300 S I 10 Service Road W Suite 103N	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 2 / 2 0 1 1</div> </div>
City Metairie State LA Zip Code 70001-7416	Amount of Each Disbursement this Period
Purpose of Disbursement King Cakes-no candidate benefitted Candidate Name	<div> <div>591.90</div> <div>003</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) PartyCity.com	Transaction ID: SB21B-516-953-e Date of Disbursement
Mailing Address 25 Green Pond Road Suite 1	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 4 / 2 0 1 1</div> </div>
City Rockaway State NJ Zip Code 07866-2047	Amount of Each Disbursement this Period
Purpose of Disbursement WMG Supplies-no candidate benefitted Candidate Name	<div> <div>370.97</div> <div>003</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

977.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
Shindigz

Mailing Address 1 Party Place

City South Whitley State IN Zip Code 46787

Purpose of Disbursement
WMG Supplies-no candidate benefitted
Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-517-954-e
Date of Disbursement

01 / 18 / 2011

Amount of Each Disbursement this Period

283.43

B.

Full Name (Last, First, Middle Initial)
QuitntEvents - KS

Mailing Address 9300 Hars Crnrs Parkway
Suite 440

City Charlotte State NC Zip Code 28269-3800

Purpose of Disbursement
Derby Event-no candidate benefitted
Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-519-960-e
Date of Disbursement

01 / 28 / 2011

Amount of Each Disbursement this Period

11980.00

C.

Full Name (Last, First, Middle Initial)
CompleteCampaigns.com

Mailing Address 610 Gateway Center Way
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement
Monthly software maintenance
Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-164-958-e
Date of Disbursement

02 / 01 / 2011

Amount of Each Disbursement this Period

403.00

SUBTOTAL of Disbursements This Page (optional)

12666.43

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC**A.**Full Name (Last, First, Middle Initial)
Hilton Washington & Towers

Mailing Address 1919 Connecticut Avenue NW

City Washington State DC Zip Code 20009-5701

Purpose of Disbursement
WMG Hotel-no candidate benefitted
Candidate Name003
Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:Transaction ID: SB21B-423-964-e
Date of DisbursementM M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 1 1

Amount of Each Disbursement this Period

8882.60

B.Full Name (Last, First, Middle Initial)
Monica Schmidt

Mailing Address 10010 Winding Ridge Drive

City Shreveport State LA Zip Code 71106-7684

Purpose of Disbursement
February admin
Candidate Name001
Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:Transaction ID: SB21B-165-963-e
Date of DisbursementM M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 1 1

Amount of Each Disbursement this Period

250.00

C.Full Name (Last, First, Middle Initial)
US Airways, Inc.

Mailing Address 111 W Rio Salado Parkway

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement
Travel: Airfare from DC to MSY
Candidate Name002
Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:Transaction ID: SB21B-167-957-e
Date of DisbursementM M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 1 1

Amount of Each Disbursement this Period

836.87

SUBTOTAL of Disbursements This Page (optional)

9969.47

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
Courtney Guastella

Mailing Address 7449 Garfield Street

City State Zip Code
New Orleans LA 70118-3636

Purpose of Disbursement
WMG expenses-no candidate benefitted

Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B-103-966-e
Date of Disbursement

02 / 06 / 2011

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)
The Mystick Krewe of Louisianians, Inc.

Mailing Address 8941 Jefferson Highway

City State Zip Code
Baton Rouge LA 70809-2407

Purpose of Disbursement
WMG tickets-no candidate benefitted

Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B-422-965-e
Date of Disbursement

02 / 09 / 2011

Amount of Each Disbursement this Period

4250.00

C.

Full Name (Last, First, Middle Initial)
Julie Dyer

Mailing Address 516 Hart Senate Office Bldg

City State Zip Code
Washington DC 20510-0001

Purpose of Disbursement
WMG expenses-no candidate benefitted

Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B-520-967-e
Date of Disbursement

02 / 12 / 2011

Amount of Each Disbursement this Period

978.66

SUBTOTAL of Disbursements This Page (optional)

5828.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement Credit card fee-no candidate benefitted</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-164-977-e</p> <p>Date of Disbursement 02 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 45.00</p> <p>003 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement March software maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-164-986-e</p> <p>Date of Disbursement 03 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 403.00</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Courtney Guastella</p> <p>Mailing Address 7449 Garfield Street</p> <p>City New Orleans State LA Zip Code 70118-3636</p> <p>Purpose of Disbursement March retainer-no candidate benefitted</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-103-980-e</p> <p>Date of Disbursement 03 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

1448.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
Monica Schmidt

Mailing Address 10010 Winding Ridge Drive

City Shreveport State LA Zip Code 71106-7684

Purpose of Disbursement

March admin

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-165-981-e
Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)
QuitntEvents - KS

Mailing Address 9300 Hars Crnrs Parkway
Suite 440

City Charlotte State NC Zip Code 28269-3800

Purpose of Disbursement
Derby event-no candidate event

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-519-982-e
Date of Disbursement

03 / 15 / 2011

Amount of Each Disbursement this Period

3594.00

C.

Full Name (Last, First, Middle Initial)
Kyle Ruckert

Mailing Address 703 7th Street SE

City Washington State DC Zip Code 20003-2740

Purpose of Disbursement
WMG expenses-no candidate benefitted

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-64-995-e
Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

378.64

SUBTOTAL of Disbursements This Page (optional)

4222.64

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial) Hampton Inn Mailing Address 101 E Jefferson Street	Transaction ID: SB21B-531-985-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	1	1						
M	M	/	D	D	/	Y	Y	Y	Y																		
0	3		2	4		2	0	1	1																		
City Louisville State KY Zip Code 40202-1301 Purpose of Disbursement Derby event-no candidate benefitted Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>1</td><td>7</td><td>0</td><td>.</td><td>2</td><td>4</td> </tr> </table> <input type="text" value="003"/> Category/ Type	2	1	7	0	.	2	4																			
2	1	7	0	.	2	4																					
B. Full Name (Last, First, Middle Initial) Mrs. Wendy Vitter Mailing Address 238 Helios Avenue City Metairie State LA Zip Code 70005-3755 Purpose of Disbursement Reimburse admin expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-124-997-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>3</td><td>8</td><td>5</td><td>.</td><td>4</td><td>7</td> </tr> </table> <input type="text" value="001"/> Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	1	3	8	5	.	4	7
M	M	/	D	D	/	Y	Y	Y	Y																		
0	3		3	0		2	0	1	1																		
3	8	5	.	4	7																						
C. Full Name (Last, First, Middle Initial) CompleteCampaigns.com Mailing Address 610 Gateway Center Way Suite K City San Diego State CA Zip Code 92102-4548 Purpose of Disbursement April software maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-164-998-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>4</td><td>0</td><td>3</td><td>.</td><td>0</td><td>0</td> </tr> </table> <input type="text" value="001"/> Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	1	4	0	3	.	0	0
M	M	/	D	D	/	Y	Y	Y	Y																		
0	4		0	1		2	0	1	1																		
4	0	3	.	0	0																						

SUBTOTAL of Disbursements This Page (optional)

2958.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial) Galt House Inn	Transaction ID: SB21B-539-1003-e Date of Disbursement																				
Mailing Address 140 N 4th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	1												
City Louisville State KY Zip Code 40202-4227	Amount of Each Disbursement this Period																				
Purpose of Disbursement Derby event-no candidate benefitted Candidate Name	<table border="1"> <tr> <td colspan="10">2990.26</td> </tr> </table>	2990.26																			
2990.26																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Courtney Guastella	Transaction ID: SB21B-103-999-e Date of Disbursement																				
Mailing Address 7449 Garfield Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	1												
City New Orleans State LA Zip Code 70118-3636	Amount of Each Disbursement this Period																				
Purpose of Disbursement April retainer-no candidate benefitted Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Monica Schmidt	Transaction ID: SB21B-165-1000-e Date of Disbursement																				
Mailing Address 10010 Winding Ridge Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	1												
City Shreveport State LA Zip Code 71106-7684	Amount of Each Disbursement this Period																				
Purpose of Disbursement April admin Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4240.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial) Miller Transportation	Transaction ID: SB21B-540-1004-e Date of Disbursement																				
Mailing Address 7917 Old Third Street Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	8		2	0	1	1												
City Louisville State KY Zip Code 40214	Amount of Each Disbursement this Period																				
Purpose of Disbursement Derby transportation-no candidate benefitted Candidate Name	<table border="1"> <tr> <td colspan="10">1040.00</td> </tr> </table>	1040.00																			
1040.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) US Airways, Inc.	Transaction ID: SB21B-167-1005-e Date of Disbursement																				
Mailing Address 111 W Rio Salado Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	1		2	0	1	1												
City Tempe State AZ Zip Code 85281-2880	Amount of Each Disbursement this Period																				
Purpose of Disbursement Derby transportation-no candidate benefitted Candidate Name	<table border="1"> <tr> <td colspan="10">1249.60</td> </tr> </table>	1249.60																			
1249.60																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B-169-1007-e Date of Disbursement																				
Mailing Address 1501 Eckington Place NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	8		2	0	1	1												
City Washington State DC Zip Code 20002-2127	Amount of Each Disbursement this Period																				
Purpose of Disbursement Derby postage-no candidate benefitted Candidate Name	<table border="1"> <tr> <td colspan="10">235.36</td> </tr> </table>	235.36																			
235.36																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2524.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
CompleteCampaigns.com

Mailing Address 610 Gateway Center Way
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement
May software maintenance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-164-1017-e
Date of Disbursement

05 / 01 / 2011

Amount of Each Disbursement this Period

403.00

B.

Full Name (Last, First, Middle Initial)
Churchill Downs

Mailing Address 700 Central Avenue

City Louisville State KY Zip Code 40208-1212

Purpose of Disbursement
Derby Event-no candidate benefitted

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-543-1018-e
Date of Disbursement

05 / 06 / 2011

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)
Hampton Inn

Mailing Address 101 E Jefferson Street

City Louisville State KY Zip Code 40202-1301

Purpose of Disbursement
Derby Event-no candidate benefitted

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-531-1016-e
Date of Disbursement

05 / 09 / 2011

Amount of Each Disbursement this Period

720.21

SUBTOTAL of Disbursements This Page (optional)

1523.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
Vincenzo

Mailing Address 150 S 5th Street

City Louisville State KY Zip Code 40202-3102

Purpose of Disbursement
Derby Event-no candidate benefitted

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-544-1019-e
Date of Disbursement

05 / 09 / 2011

Amount of Each Disbursement this Period

3533.67

B.

Full Name (Last, First, Middle Initial)
Courtney Guastella

Mailing Address 7449 Garfield Street

City New Orleans State LA Zip Code 70118-3636

Purpose of Disbursement
May retainer-no candidate benefitted

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-103-1026-e
Date of Disbursement

05 / 10 / 2011

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Monica Schmidt

Mailing Address 10010 Winding Ridge Drive

City Shreveport State LA Zip Code 71106-7684

Purpose of Disbursement
May admin

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-165-1027-e
Date of Disbursement

05 / 10 / 2011

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

4783.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial) Mrs. Wendy Vitter Mailing Address 238 Helios Avenue	Transaction ID: SB21B-124-1038-e Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 1 / 2 0 1 1</div> </div>
City Metairie State LA Zip Code 70005-3755 Purpose of Disbursement Reimburse expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>293.63</div> <div>001</div> Category/ Type
B. Full Name (Last, First, Middle Initial) Vincenzo Mailing Address 150 S 5th Street City Louisville State KY Zip Code 40202-3102 Purpose of Disbursement Derby Event-no candidate benefit Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-544-1022-e Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>462.80</div> <div>003</div> Category/ Type
C. Full Name (Last, First, Middle Initial) CompleteCampaigns.com Mailing Address 610 Gateway Center Way Suite K City San Diego State CA Zip Code 92102-4548 Purpose of Disbursement June software maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-164-1036-e Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 1 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>403.00</div> <div>001</div> Category/ Type

SUBTOTAL of Disbursements This Page (optional)

1159.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
Courtney Guastella

Mailing Address 7449 Garfield Street

City State Zip Code
New Orleans LA 70118-3636

Purpose of Disbursement
Fundraising: June Retainer

Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B-103-1040-e
Date of Disbursement

06 / 09 / 2011

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Monica Schmidt

Mailing Address 10010 Winding Ridge Drive

City State Zip Code
Shreveport LA 71106-7684

Purpose of Disbursement
June admin

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B-165-1041-e
Date of Disbursement

06 / 09 / 2011

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Wendy Vitter

Mailing Address 238 Helios Avenue

City State Zip Code
Metairie LA 70005-3755

Purpose of Disbursement
Reimburse expenses

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B-124-1045-e
Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

372.27

SUBTOTAL of Disbursements This Page (optional)

1622.27

TOTAL This Period (last page this line number only)

55578.58

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
Community Press, LLC

Mailing Address 910 N Foster Drive

City State Zip Code
Baton Rouge LA 70806-1807

Purpose of Disbursement
Grassroots support

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB23-528-979-e
Date of Disbursement

03 / 01 / 2011

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Vice Chairman's Reception

Mailing Address PO Box 4037

City State Zip Code
New Orleans LA 70178-4037

Purpose of Disbursement
Grass roots support

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB23-529-983-e
Date of Disbursement

03 / 18 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Louisiana Institute of Public Policy & Politics

Mailing Address 13144 Perkins Road

City State Zip Code
Baton Rouge LA 70810-2029

Purpose of Disbursement
Grass roots support

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB23-530-984-e
Date of Disbursement

03 / 19 / 2011

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A. Full Name (Last, First, Middle Initial) Friends Of Roy Blunt Mailing Address PO Box 410182	Transaction ID: SB23-558-1001-e Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 1 1</div> </div>
City Kansas City State MO Zip Code 64141-0182 Purpose of Disbursement Political Contribution: Debt retirement Candidate Name Roy Blunt Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District:	Amount of Each Disbursement this Period <div>2500.00</div> <div>011</div> Category/ Type
B. Full Name (Last, First, Middle Initial) Republican Party of Louisiana Mailing Address 530 Lakeland Drive Suite 215 City Baton Rouge State LA Zip Code 70802-4441 Purpose of Disbursement Political Contribution: Contribution Candidate Name Republican Party of Louisiana Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-491-1002-e Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 7 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>5000.00</div> <div>011</div> Category/ Type
C. Full Name (Last, First, Middle Initial) The Political Firm Mailing Address 611 North Street City Baton Rouge State LA Zip Code 70802-5420 Purpose of Disbursement Grass roots support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-396-1042-e Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 4 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>1165.82</div> <div>011</div> Category/ Type

SUBTOTAL of Disbursements This Page (optional)

8665.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)
Heller For Senate

Mailing Address PO Box 371907

City Las Vegas State NV Zip Code 89137-1907

Purpose of Disbursement
Political Contribution: Contribution

Candidate Name
Dean Heller

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
State: NV District: Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23-556-1044-e
Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
Snowe For Senate

Mailing Address PO BOX 2012

City PORTLAND State ME Zip Code 04104

Purpose of Disbursement
Political Contribution: Contribution

Candidate Name
Olympia J Snowe

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
State: ME District: Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23-554-1043-e
Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

21665.82